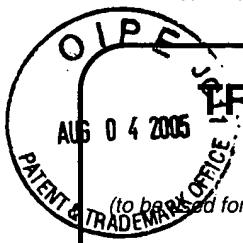


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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

18

|                      |                      |
|----------------------|----------------------|
| Application Number   | 10/646,734           |
| Filing Date          | August 25, 2003      |
| First Named Inventor | Klaus MOELLER et al. |
| Group Art Unit       | 2644                 |
| Examiner Name        | Corey P. Chau        |

Attorney Docket Number

23390-000121/US

## ENCLOSURES (check all that apply)

|   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Response to Notice of Non-Compliance<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request (3 months)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimers<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
|   | Remarks  | The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.   |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |   |  |                                 |                    |
|-------------------------|---|--|---------------------------------|--------------------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C.  |  | Attorney Name<br>Gary D. Yacura | Reg. No.<br>35,416 |
| Signature               |  |  |                                 |                    |
| Date                    | August 4, 2005  |  |                                 |                    |